SATELLE ADDITION FOR DESCRIPTION DECO								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003								10-620-928					
CLAIMS AS FILED - PART I (Cotumn 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			3				RAT	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OB	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			3 minus 20=		* 0		X\$ 9		2 2 2 1, 27		X\$18=	**	
INDEPENDENT CLAIMS				inus 3 =	· 0					OR			
MULTIPLE DEPENDENT CLAIM P			La contraction of the contractio				X42=			OR	X84≃	-0	
							+140	=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	۱L		OR	TOTAL	750	
CLAIMS AS AMENDED - PART II											OTHER		
		(Column 1) — CLAIMS	-	(Colur HIGH		(Column 3)	SMA	LLE	NTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MQ.	Total	*	Minus	**	*	=	X\$ 9	-		OR	X\$18=		
AME	Independent	*	Minus	***		=	X42:	_		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		ing at	-	•	UH			
	1						+140			OR	+280=		
			3				TO ADDIT, F			OR	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Colur		(Column 3)	1		2 - 22 - 1				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		= -	X42:			OR	X84=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM					Un	-		
	e e						+140	1		OR	+280≃		
. /							TO ADDIT. P			OR	TOTAL ADDIT. FEE	A - 14 - 14 - 14 - 14 - 14 - 14 - 14 - 1	
		(Column 1)		(Colur		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	PATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	micro en	=	X\$ 9	_		OR	X\$18=		
	Independent	*	Minus	***		=	X42=				X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	704=		
	to an in the second						+140			OR	+280=		
**	If the "Highest Ne	umn 1 is less than the limber Previously P	aid For" IN TH	IS SPACE I	s less tha	n 20, enter "20."	ADDIT. F			OR	TOTAL ADDIT. FEE		
***	II the "Highest Ni The "Highest Nur	umber Previously P mber Previously Pa	aid For" IN Th id For" (Total :	NS SPACE in or Independent	is less tha ent) is the	an 3, enter "3." highest number			ropriate bo				